

POSITION	INITIALS	ID NO.	DATE
	<i>me</i>		8/9/00
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	8/14/00
FORMALITY REVIEW	<i>CA</i>	64616	9/17/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

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Claim	Final	Original	Date
1	0	✓	8/15/01
2	✓	✓	8/15/01
3	✓	✓	8/15/01
4	✓	✓	8/15/01
5	✓	✓	8/15/01
6	✓	✓	8/15/01
7	✓	✓	8/15/01
8	✓	✓	8/15/01
9	✓	✓	8/15/01
10	✓	✓	8/15/01
11	0	✓	8/15/01
12	✓	✓	8/15/01
13	✓	✓	8/15/01
14	✓	✓	8/15/01
15	✓	✓	8/15/01
16	0	0	8/15/01
17	✓	✓	8/15/01
18	✓	✓	8/15/01
19	✓	✓	8/15/01
20	0	✓	8/15/01
21	✓	✓	8/15/01
22	✓	✓	8/15/01
23	0	0	8/15/01
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If more than 150 claims or 10 actions
staple additional sheet here

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